

# Exhibit I

Form **8879**

(Rev. January 2021)

Department of the Treasury  
Internal Revenue Service**IRS e-file Signature Authorization**

- **ERO must obtain and retain completed Form 8879.**
- **Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.**

OMB No. 1545-0074

Submission Identification Number (SID) ► [REDACTED]

Taxpayer's name

Daniel'la Deering

Spouse's name

Social security number

Spouse's social security number

**Part I Tax Return Information – Tax Year Ending December 31, 2021** (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

**Note:** Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	342,839.
2	Total tax	2	90,588.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	63,348.
4	Amount you want refunded to you	4	
5	Amount you owe	5	23,104.

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

☒ I authorize WELLS, SCHLUTER, HANSON & COMPANY, INC. to enter or generate my PIN [REDACTED] as my

ERO firm name

Enter five digits, but  
don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ►

**Spouse's PIN: check one box only**

☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my

ERO firm name

Enter five digits, but  
don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

**Practitioner PIN Method Returns Only – continue below****Part III Certification and Authentication – Practitioner PIN Method Only****ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN.[REDACTED]  
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► David Armstrong, EA

Date ►

**ERO Must Retain This Form – See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.**

**WELLS, SCHLUTER, HANSON & COMPANY, INC.**

7300 France Ave S Ste 215

Edina, MN 55435

9528815343

Client DED1339

June 2, 2023

**Daniel'la Deering**  
**1809 Irving Ave S**  
**Minneapolis, MN 55403**  
**Mobile: 6512468319**

**FEDERAL FORMS**

Form 1040	2021 U.S. Individual Income Tax Return	\$	275.00
Form 1040-V	Payment Voucher		
Schedule 2	Additional Taxes		
Schedule 3	Additional Credits and Payments		
Schedule A	Itemized Deductions		55.00
Schedule B	Interest and Dividend Income		15.00
Schedule D	Capital Gains and Losses		20.00
Form 1116	Foreign Tax Credit		25.00
Form 2210	Underpayment of Estimated Tax		15.00
Form 4868	Application for Automatic Extension		25.00
Form 5329	Additional Taxes on Retirement Plans		25.00
Form 8283	Noncash Charitable Contributions		25.00
Form 8879	IRS e-file Signature Authorization		
Form 8889	Health Savings Accounts		5.00
Form 8915F (2020)	Qualified 2020 Disaster Distributions/Repayments		
Form 8959	Additional Medicare Tax		5.00
Form 8960	Net Investment Income Tax		25.00
Form 8995-A	Qualified Business Income Deduction		25.00

**MINNESOTA FORMS**

Form M1	2021 Minnesota Individual Income Tax Return	\$	195.00
Schedule M1SA	Minnesota Itemized Deductions		5.00
Schedule M1W	Withholding Information		
Schedule M15	Underpayment of Estimated Income Tax		10.00
Inc Tax Ext Pmt Voucher	Income Tax Extension Payment Voucher		
Inc Tax Ret Pmt Voucher	Income Tax Return Payment Voucher		

**FEE SUMMARY**

Preparation Fee	\$	750.00
Amount Due	\$	750.00

**2021 Individual Return**  
prepared for:

**Daniel'la Deering**  
1809 Irving Ave S  
Minneapolis, MN 55403

**WELLS, SCHLUTER, HANSON & COMPANY, INC.**  
7300 France Ave S Ste 215  
Edina, MN 55435

**WELLS, SCHLUTER, HANSON & COMPANY, INC.  
7300 FRANCE AVE S STE 215  
EDINA, MN 55435  
9528815343**

June 2, 2023

Daniel'la Deering  
1809 Irving Ave S  
Minneapolis, MN 55403

Dear Daniel'la,

Enclosed for your review:

Form 1040                      2021 U.S. Individual Income Tax Return

Form M1                      2021 Minnesota Individual Income Tax Return  
Inc Tax Ret Pmt Voucher Income Tax Return Payment Voucher

Each tax return or form listed above should be filed in accordance with the enclosed filing instructions.

Please be sure to call if you have any questions.

Sincerely,

David Armstrong, EA

2021

## Federal Filing Instructions

Daniel'la Deering

### ELECTRONICALLY FILED:

Form 1040 - 2021 U.S. Individual Income Tax Return

The above tax return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879 - IRS e-file Signature Authorization.

### SIGNATURE:

Sign and date the following forms:

Form 8879 - IRS e-file Signature Authorization.

### FORM TO FILE:

Form 1040-V - 2021 Payment Voucher

### PAYMENT:

There is a balance due of \$23,104.

To pay by check, make your check payable to the "United States Treasury". Write your social security number, daytime phone number, and "2021 Form 1040" on the check. If this is a joint return, enter the SSN shown first on your return. Do not attach the check to Form 1040-V. Instead, place it loose in the envelope and also enclose Form 1040-V.

To pay by direct pay, visit [www.irs.gov/payments](http://www.irs.gov/payments) for more information.

### WHEN TO FILE:

On or before October 17, 2022.

### WHERE TO FILE:

If paying by check:

Internal Revenue Service  
P.O. Box 931000  
Louisville, KY 40293-1000

If paying by direct pay:

Do not file Form 1040-V payment voucher.

2021

## Federal Income Tax Summary

Page 1

Daniel'la Deering

	2021	2020	Diff
<b>INCOME</b>			
Wages, salaries, tips, etc.....	200,054	234,690	-34,636
Dividend income.....	4,139	2,853	1,286
Taxable pensions.....	129,701	28,728	100,973
Capital gain or loss.....	8,945	8,230	715
Total income.....	342,839	274,501	68,338
<b>ADJUSTMENTS TO INCOME</b>			
Total adjustments.....	0	0	0
Adjusted gross income.....	342,839	274,501	68,338
<b>ITEMIZED DEDUCTIONS</b>			
Taxes.....	10,000	10,000	0
Interest.....	23,114	37,783	-14,669
Contributions.....	2,200	500	1,700
Total itemized deductions.....	35,314	48,283	-12,969
<b>TAX COMPUTATION</b>			
Standard deduction.....	12,550	18,650	-6,100
Charitable contr. if taking standard ded	300	0	300
Larger of itemized or standard deduction	35,314	48,283	-12,969
Qualified business income deduction.....	40	0	40
Taxable income.....	307,485	226,218	81,267
Tax before credits.....	79,949	50,627	29,322
<b>CREDITS</b>			
Foreign tax credit.....	53	44	9
Total credits.....	53	44	9
Tax after credits.....	79,896	50,583	29,313
<b>OTHER TAXES</b>			
Tax on IRAs, other qual. ret. plans, etc	10,119	22	10,097
Other taxes.....	573	602	-29
Total tax.....	90,588	51,207	39,381
<b>PAYMENTS &amp; REFUNDABLE CREDITS</b>			
Federal income tax withheld.....	63,348	70,521	-7,173
Excess FICA and RRTA tax withheld.....	4,136	0	4,136
Total payments.....	67,484	70,521	-3,037
<b>REFUND OR AMOUNT DUE</b>			
Amount overpaid.....	0	19,314	-19,314
Amount refunded to you.....	0	19,314	-19,314
Amount you owe.....	23,104	0	23,104
<b>TAX RATES</b>			
Marginal tax rate.....	35.0%	35.0%	0.0%
Effective tax rate.....	29.5%	22.6%	6.9%

2021

# Minnesota Income Tax Summary

Page 1

Daniel'la Deering

	2021	2020	Diff
<b>MINNESOTA TAXABLE INCOME</b>			
Federal adjusted gross income.....	342,839	274,501	68,338
Itemized or standard deduction.....	31,024	45,983	-14,959
Total subtractions.....	31,024	45,983	-14,959
<b>TAX</b>			
Minnesota taxable income.....	311,815	228,518	83,297
Tax.....	26,059	16,257	9,802
Alternative minimum tax.....	0	971	-971
Resident/part year/nonresident tax.....	26,059	17,228	8,831
Tax before credits.....	26,059	17,228	8,831
Tax after nonrefundable credits.....	26,059	17,228	8,831
Net tax due.....	26,059	17,228	8,831
<b>PAYMENTS AND CREDITS</b>			
Minnesota income tax withheld.....	12,473	17,274	-4,801
Total payments and refundable credits....	12,473	17,274	-4,801
<b>REFUND OR AMOUNT DUE</b>			
Amount you owe.....	13,716	0	13,716
Total refund.....	0	46	-46
Amount of refund sent to you.....	0	46	-46
<b>TAX RATES</b>			
Marginal tax rate.....	9.9%	9.9%	0.0%
Effective tax rate.....	8.4%	7.1%	1.3%



2021

Agency Disclosure Statements

Page 1

Client

Daniel'la Deering

**Minnesota Disclosure Statements**

**Statement:**

The most accurate and efficient way to make a payment is electronically. You can set up a return payment - and up to four estimated payments - to come out of your bank account on the date you choose. Electronic payments are secure and you receive credit on the selected payment date.

To pay electronically with your electronically filed return: Make the applicable entries in the Minnesota section of the Miscellaneous Info./Direct Deposit screen.

You may also make an electronic payment from the Minnesota Department of Revenue website: <https://www.revenue.state.mn.us/make-payment>

**Statement:**

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the Minnesota Department of Revenue, as applicable by law.

File only if you are making a payment with Form 1040. Return this voucher with check or money order payable to the "United States Treasury." Please write your social security number, daytime phone number, and "2021 Form 1040" on your check or money order. Please do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Make your check payable to the "United States Treasury" and  
mail Form 1040-V payments to:

Internal Revenue Service  
P.O. Box 931000  
Louisville, KY 40293-1000

Form **1040-V** (2021)

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury  
Internal Revenue Service (99)

**2021**

## Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the 'United States Treasury.'
- ▶ Write your social security number (SSN) on your check or money order.

Enter the amount  
of your payment . . . . . ▶

**23,104.**

FDIA8601L 06/24/21

1032



DANIEL'LA DEERING  
1809 IRVING AVE S  
MINNEAPOLIS MN 55403

INTERNAL REVENUE SERVICE  
P.O. BOX 931000  
LOUISVILLE KY 40293-1000

FI DEER 30 0 202112 610

0:20-cv-01534-DSD-ECW

DD00003573

Make your check payable to the "United States Treasury"  
include your SSN, daytime phone # and "2021 Form 4868"  
Mail your payment to:

Internal Revenue Service  
P.O. Box 931300  
Louisville, KY 40293-1300

▼ DETACH HERE ▼

Form <b>4868</b> Department of the Treasury Internal Revenue Service (99)		<b>Application for Automatic Extension of Time To File U.S. Individual Income Tax Return</b>		FDIA4601L 06/24/21 <b>2021</b>	
For calendar year 2021, or other tax year beginning		, 2021, ending			
<b>Part I</b>	<b>Identification</b>	<b>Part II</b>	<b>Individual Income Tax</b>		
<b>1</b>  Daniel'la Deering WELLS, SCHLUTER, HANSON & COMPANY, 7300 France Ave S Ste 215 Edina, MN 55435		<b>4</b> Estimate of total tax liability for 2021... \$ <b>90,588.</b>			
		<b>5</b> Total 2021 payments ..... <b>67,484.</b>			
		<b>6</b> <b>Balance due.</b> Subtract line 5 from line 4. See instructions..... <b>23,104.</b>			
		<b>7</b> Amount you're paying (see instructions)..... <b>23,104.</b>			
<b>2</b> [REDACTED]		<b>8</b> Check here if you're "out of the country" and a U.S. citizen or resident. See instructions..... <input type="checkbox"/>			
<b>3</b>		<b>9</b> Check here if you file Form 1040-NR and didn't receive wages as an employee subject to U.S. income tax withholding..... <input type="checkbox"/>			

Form <b>1040</b> Department of the Treasury — Internal Revenue Service(99)		<b>2021</b>	OMB No. 1545-0074	IRS Use Only — Do not write or staple in this space.																																																																				
<b>Filing Status</b> <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately (MFS) <input type="checkbox"/> Head of household (HOH) <input type="checkbox"/> Qualifying widow(er) (QW) Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶																																																																								
Your first name and middle initial <b>Daniel'la Deering</b>			Last name <b>Deering</b>																																																																					
Your social security number <b>[REDACTED]</b>			Spouse's social security number																																																																					
Home address (number and street). If you have a P.O. box, see instructions. <b>1809 Irving Ave S</b>			Apt. no.																																																																					
City, town, or post office. If you have a foreign address, also complete spaces below. <b>Minneapolis, MN 55403</b>			State ZIP code																																																																					
Foreign country name		Foreign province/state/county		Foreign postal code																																																																				
<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse																																																																								
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																								
<b>Standard Deduction</b> <b>Someone can claim:</b> <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent <input type="checkbox"/> Spouse itemizes on a separate return or you were a dual-status alien																																																																								
<b>Age/Blindness</b> <b>You:</b> <input type="checkbox"/> Were born before January 2, 1957 <input type="checkbox"/> Are blind <b>Spouse:</b> <input type="checkbox"/> Was born before January 2, 1957 <input type="checkbox"/> Is blind																																																																								
<b>Dependents</b> (see instructions): If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>																																																																								
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Form <b>1040</b> (2021)																																																																								

Form 1040 (2021) Daniel'la Deering

Page 2

<b>16 Tax</b> (see instructions). Check if any from Form(s): <b>1</b> <input type="checkbox"/> 8814 <b>2</b> <input type="checkbox"/> 4972 <b>3</b> <input type="checkbox"/> _____	<b>16</b> 79,949.
<b>17</b> Amount from Schedule 2, line 3.....	<b>17</b>
<b>18</b> Add lines 16 and 17.....	<b>18</b> 79,949.
<b>19</b> Nonrefundable child tax credit or credit for other dependents from Schedule 8812.....	<b>19</b>
<b>20</b> Amount from Schedule 3, line 8.....	<b>20</b> 53.
<b>21</b> Add lines 19 and 20.....	<b>21</b> 53.
<b>22</b> Subtract line 21 from line 18. If zero or less, enter -0-.....	<b>22</b> 79,896.
<b>23</b> Other taxes, including self-employment tax, from Schedule 2, line 21.....	<b>23</b> 10,692.
<b>24</b> Add lines 22 and 23. This is your <b>total tax</b> ..... ▶	<b>24</b> 90,588.
<b>25</b> Federal income tax withheld from: <b>a</b> Form(s) W-2..... <b>25a</b> 35,718. <b>b</b> Form(s) 1099..... <b>25b</b> 27,630. <b>c</b> Other forms (see instructions)..... <b>25c</b> <b>d</b> Add lines 25a through 25c..... <b>25d</b> 63,348.	<b>25d</b> 63,348.
<div style="border: 1px solid black; padding: 2px; width: fit-content;">If you have a qualifying child, attach Sch. EIC.</div> <b>26</b> 2021 estimated tax payments and amount applied from 2020 return.....	<b>26</b>
<b>27a</b> Earned income credit (EIC)..... <b>27a</b> Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions..... ▶ <input type="checkbox"/> <b>b</b> Nontaxable combat pay election... <b>27b</b> <b>c</b> Prior year (2019) earned income... <b>27c</b>	<b>27a</b>
<b>28</b> Refundable child tax credit or additional child tax credit from Schedule 8812....	<b>28</b>
<b>29</b> American opportunity credit from Form 8863, line 8.....	<b>29</b>
<b>30</b> Recovery rebate credit. See instructions.....	<b>30</b>
<b>31</b> Amount from Schedule 3, line 15.....	<b>31</b> 4,136.
<b>32</b> Add lines 27a and 28 through 31. These are your <b>total other payments and refundable credits</b> ..... ▶	<b>32</b> 4,136.
<b>33</b> Add lines 25d, 26, and 32. These are your <b>total payments</b> ..... ▶	<b>33</b> 67,484.
<b>Refund</b> <b>34</b> If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> .....	<b>34</b>
<b>35a</b> Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here... ▶ <input type="checkbox"/> ▶ <b>b</b> Routing number..... ▶ <b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings ▶ <b>d</b> Account number.....	<b>35a</b>
<b>36</b> Amount of line 34 you want <b>applied to your 2022 estimated tax</b> ... ▶ <b>36</b>	<b>36</b>
<b>Amount You Owe</b> <b>37</b> <b>Amount you owe</b> . Subtract line 33 from line 24. For details on how to pay, see instructions..... ▶	<b>37</b> 23,104.
<b>38</b> Estimated tax penalty (see instructions)..... ▶ <b>38</b>	<b>38</b>
<b>Third Party Designee</b> Do you want to allow another person to discuss this return with the IRS? See instructions..... ▶ <input checked="" type="checkbox"/> <b>Yes</b> . Complete below. <input type="checkbox"/> <b>No</b> Designee's name ▶ <b>David Armstrong, EA</b> Phone no. ▶ <b>9528815343</b> Personal identification number (PIN) ▶	
<b>Sign Here</b> Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature _____ Date _____ Your occupation <b>Attorney</b> Spouse's signature. If a joint return, <b>both</b> must sign. _____ Date _____ Spouse's occupation _____ Phone no. <b>6512468319</b> Email address _____	
<b>Preparer's name</b> <b>David Armstrong, EA</b> <b>Preparer's signature</b> <b>David Armstrong, EA</b> <b>Date</b> _____ <b>PTIN</b> _____ <b>Check if:</b> <input type="checkbox"/> Self-employed	
<b>Firm's name</b> ▶ <b>WELLS, SCHLUTER, HANSON &amp; COMPANY, INC.</b> <b>Phone no.</b> <b>9528815343</b>	
<b>Firm's address</b> ▶ <b>7300 France Ave S Ste 215 Edina, MN 55435</b> <b>Firm's EIN</b> ▶ <b>411960688</b>	

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

Form 1040 (2021)

**SCHEDULE 2**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Additional Taxes**▶ Attach to Form 1040, 1040-SR, or 1040-NR.  
▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Daniel'la Deering

Your social security number

**Part I Tax**

1	Alternative minimum tax. Attach Form 6251.	1	0.
2	Excess advance premium tax credit repayment. Attach Form 8962.	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	0.

**Part II Other Taxes**

4	Self-employment tax. Attach Schedule SE.	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137.	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919.	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6.	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.	8	10,119.
9	Household employment taxes. Attach Schedule H.	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required.	10	
11	Additional Medicare Tax. Attach Form 8959.	11	94.
12	Net investment income tax. Attach Form 8960.	12	479.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12.	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares.	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000.	15	
16	Recapture of low-income housing credit. Attach Form 8611.	16	

(continued on page 2)

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2021

Schedule 2 (Form 1040) 2021 Daniel'la Deering

Page 2

**Part II Other Taxes** (continued)

<b>17</b> Other additional taxes:			
<b>a</b> Recapture of other credits. List type, form number, and amount ▶ _____	<b>17a</b>		
<b>b</b> Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions. ....	<b>17b</b>		
<b>c</b> Additional tax on HSA distributions. Attach Form 8889. ....	<b>17c</b>		
<b>d</b> Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889. ....	<b>17d</b>		
<b>e</b> Additional tax on Archer MSA distributions. Attach Form 8853. ....	<b>17e</b>		
<b>f</b> Additional tax on Medicare Advantage MSA distributions. Attach Form 8853. .	<b>17f</b>		
<b>g</b> Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property. ....	<b>17g</b>		
<b>h</b> Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A. ....	<b>17h</b>		
<b>i</b> Compensation you received from a nonqualified deferred compensation plan described in section 457A. ....	<b>17i</b>		
<b>j</b> Section 72(m)(5) excess benefits tax. ....	<b>17j</b>		
<b>k</b> Golden parachute payments. ....	<b>17k</b>		
<b>l</b> Tax on accumulation distribution of trusts. ....	<b>17l</b>		
<b>m</b> Excise tax on insider stock compensation from an expatriated corporation. . .	<b>17m</b>		
<b>n</b> Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866 . .	<b>17n</b>		
<b>o</b> Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR. ....	<b>17o</b>		
<b>p</b> Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund. ....	<b>17p</b>		
<b>q</b> Any interest from Form 8621, line 24. ....	<b>17q</b>		
<b>z</b> Any other taxes. List type and amount ▶ _____	<b>17z</b>		
<b>18</b> Total additional taxes. Add lines 17a through 17z. ....		<b>18</b>	
<b>19</b> Additional tax from Schedule 8812. ....		<b>19</b>	
<b>20</b> Section 965 net tax liability installment from Form 965-A. ....	<b>20</b>		
<b>21</b> Add lines 4, 7 through 16, 18, and 19. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b. ....		<b>21</b>	10,692.

Schedule 2 (Form 1040) 2021

**SCHEDULE 3**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Additional Credits and Payments**▶ Attach to Form 1040, 1040-SR, or 1040-NR.  
▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Daniel'la Deering

Your social security number

**Part I Nonrefundable Credits**

1	Foreign tax credit. Attach Form 1116 if required. ....	1	53.
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441. ....	2	
3	Education credits from Form 8863, line 19. ....	3	
4	Retirement savings contributions credit. Attach Form 8880. ....	4	
5	Residential energy credits. Attach Form 5695. ....	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800. ....	6a	
b	Credit for prior year minimum tax. Attach Form 8801. ....	6b	
c	Adoption credit. Attach Form 8839. ....	6c	
d	Credit for the elderly or disabled. Attach Schedule R. ....	6d	
e	Alternative motor vehicle credit. Attach Form 8910. ....	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936. ....	6f	
g	Mortgage interest credit. Attach Form 8396. ....	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859. ....	6h	
i	Qualified electric vehicle credit. Attach Form 8834. ....	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911. ....	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912. ....	6k	
l	Amount on Form 8978, line 14. See instructions. ....	6l	
z	Other nonrefundable credits. List type and amount ▶ _____	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z. ....	7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20. ....	8	53.

(continued on page 2)

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.****Schedule 3 (Form 1040) 2021**



Schedule 3 (Form 1040) 2021 Daniel'la Deering

Page 2

**Part II Other Payments and Refundable Credits**

<b>9</b>	Net premium tax credit. Attach Form 8962.....	<b>9</b>	
<b>10</b>	Amount paid with request for extension to file (see instructions).....	<b>10</b>	
<b>11</b>	Excess social security and tier 1 RRTA tax withheld.....	<b>11</b>	4,136.
<b>12</b>	Credit for federal tax on fuels. Attach Form 4136.....	<b>12</b>	
<b>13</b>	Other payments or refundable credits:		
<b>a</b>	Form 2439.....	<b>13a</b>	
<b>b</b>	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021.....	<b>13b</b>	
<b>c</b>	Health coverage tax credit from Form 8885.....	<b>13c</b>	
<b>d</b>	Credit for repayment of amounts included in income from earlier years.....	<b>13d</b>	
<b>e</b>	Reserved for future use.....	<b>13e</b>	
<b>f</b>	Deferred amount of net 965 tax liability (see instructions).....	<b>13f</b>	
<b>g</b>	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441.....	<b>13g</b>	
<b>h</b>	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021.....	<b>13h</b>	
<b>z</b>	Other payments or refundable credits. List type and amount ▶ .....	<b>13z</b>	
<b>14</b>	Total other payments or refundable credits. Add lines 13a through 13z.....	<b>14</b>	
<b>15</b>	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31.....	<b>15</b>	4,136.

Schedule 3 (Form 1040) 2021

Form **2210**Department of the Treasury  
Internal Revenue Service**Underpayment of Estimated Tax by  
Individuals, Estates, and Trusts**► Go to [www.irs.gov/Form2210](http://www.irs.gov/Form2210) for instructions and the latest information.  
► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0140

**2021**Attachment  
Sequence No. **06**

Name(s) shown on tax return

Daniel 'la Deering

Identifying number

**Do You Have To File Form 2210?**

Complete lines 1 through 7 below. Is line 4 or line 7 less than \$1,000? **Yes** → **Don't file Form 2210.** You don't owe a penalty.

**No** ↓

Complete lines 8 and 9 below. Is line 6 equal to or more than line 9? **Yes** → You **don't** owe a penalty. **Don't** file Form 2210 unless **box E** in Part II applies, then file page 1 of Form 2210.

**No** ↓

You may owe a penalty. Does any box in Part II below apply? **Yes** → You **must** file Form 2210. Does box **B, C,** or **D** in Part II apply?

**No** ↓ **Yes** → You must figure your penalty.

**Don't file Form 2210.** You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but **don't file Form 2210.**

You **aren't** required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but **file only page 1 of Form 2210.**

**Part I Required Annual Payment**

1	Enter your 2021 tax after credits from Form 1040, 1040-SR, or 1040-NR, line 22. (See the instructions if not filing Form 1040.)	1	79,896.
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	10,692.
3	Other payments and refundable credits (see instructions)	3	( 0.)
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't</b> file Form 2210	4	90,588.
5	Multiply line 4 by 90% (0.90)	5	81,529.
6	Withholding taxes. <b>Don't</b> include estimated tax payments. See instructions	6	67,484.
7	Subtract line 6 from line 4. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't</b> file Form 2210	7	23,104.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	56,328.
9	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 5 or line 8	9	56,328.

Next: Is line 9 more than line 6?

- ☒ **No.** You **don't** owe a penalty. **Don't** file Form 2210 unless box **E** below applies.
- ☐ **Yes.** You may owe a penalty, but **don't** file Form 2210 unless one or more boxes in Part II below applies.
- If box **B, C,** or **D** applies, you must figure your penalty and file Form 2210.
  - If box **A** or **E** applies (but not **B, C,** or **D**), file only page 1 of Form 2210. You **aren't** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210.**

**Part II Reasons for Filing.** Check applicable boxes. If none apply, **don't** file Form 2210.

- A** ☐ You request a **waiver** (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty.
- B** ☐ You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C** ☐ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D** ☐ Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E** ☐ You filed or are filing a joint return for either 2020 or 2021, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you **aren't** required to figure your penalty (unless box **B, C,** or **D** applies).

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form **2210** (2021)

Form 2210 (2021) Daniel'la Deering

Page 2

**Part III Penalty Computation** (See the instructions if you're filing Form 1040-NR.)

<b>Section A – Figure Your Underpayment</b>		<b>Payment Due Dates</b>			
		<b>(a)</b> 4/15/21	<b>(b)</b> 6/15/21	<b>(c)</b> 9/15/21	<b>(d)</b> 1/15/22
<b>10 Required installments.</b> If box C in Part II applies, enter the amounts from Schedule AI, line 27. Otherwise, enter 25% (0.25) of line 9, Form 2210, in each column. For fiscal year filers, see instructions	<b>10</b>	14,082.	14,082.	14,082.	14,082.
<b>11</b> Estimated tax paid and tax withheld (see the instructions). For column (a) only, also enter the amount from line 11 on line 15, column (a). If line 11 is equal to or more than line 10 for all payment periods, stop here; you don't owe a penalty. <b>Don't file Form 2210 unless you checked a box in Part II.</b>	<b>11</b>	16,871.	16,871.	16,871.	16,871.

**Complete lines 12 through 18 of one column before going to line 12 of the next column.**

<b>12</b> Enter the amount, if any, from line 18 in the previous column.	<b>12</b>		2,789.	5,578.	8,367.
<b>13</b> Add lines 11 and 12	<b>13</b>		19,660.	22,449.	25,238.
<b>14</b> Add the amounts on lines 16 and 17 in the previous column.	<b>14</b>				
<b>15</b> Subtract line 14 from line 13. If zero or less, enter -0-. For column (a) only, enter the amount from line 11.	<b>15</b>	16,871.	19,660.	22,449.	25,238.
<b>16</b> If line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-.	<b>16</b>		0.	0.	
<b>17 Underpayment.</b> If line 10 is equal to or more than line 15, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18.	<b>17</b>				
<b>18</b> Overpayment. If line 15 is more than line 10, subtract line 10 from line 15. Then go to line 12 of the next column.	<b>18</b>	2,789.	5,578.	8,367.	

**Section B – Figure the Penalty** (Use the Worksheet for Form 2210, Part III, Section B – Figure the Penalty in the instructions.)

<b>19 Penalty.</b> Enter the total penalty from line 14 of the Worksheet for Form 2210, Part III, Section B – Figure the Penalty. Also include this amount on Form 1040, 1040-SR, or 1040-NR, line 38; or Form 1041, line 27.	<b>19</b>	
<b>Don't file Form 2210 unless you checked a box in Part II.</b>		

Form 2210 (2021)

0:20-cv-01534-DSD-ECW

**SCHEDULE A**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Itemized Deductions**► Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

► Attach to Form 1040 or 1040-SR.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR

Daniel 'la Deering

Your social security number

**Medical  
and  
Dental  
Expenses****Caution:** Do not include expenses reimbursed or paid by others.

- |          |   |          |    |
|----------|---|----------|----|
| <b>1</b> | Medical and dental expenses (see instructions) .....                        | <b>1</b> |    |
| <b>2</b> | Enter amount from Form 1040 or 1040-SR, line 11. .... <b>2</b>              |          |    |
| <b>3</b> | Multiply line 2 by 7.5% (0.075) .....                                       | <b>3</b> |    |
| <b>4</b> | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- ..... | <b>4</b> | 0. |

**Taxes You  
Paid**

- |          |  |           |         |
|----------|--|-----------|---------|
| <b>5</b> | State and local taxes.   |           |         |
| <b>a</b> | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box. .... ► <input type="checkbox"/> | <b>5a</b> | 12,473. |
| <b>b</b> | State and local real estate taxes (see instructions) .....   | <b>5b</b> | 15,691. |
| <b>c</b> | State and local personal property taxes .....  | <b>5c</b> |         |
| <b>d</b> | Add lines 5a through 5c .....  | <b>5d</b> | 28,164. |
| <b>e</b> | Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) .....  | <b>5e</b> | 10,000. |
| <b>6</b> | Other taxes. List type and amount ► .....  | <b>6</b>  |         |
| <b>7</b> | Add lines 5e and 6 .....   | <b>7</b>  | 10,000. |

**Interest You  
Paid****Caution:** Your mortgage interest deduction may be limited (see instructions).

- |           |   |           |         |
|-----------|---|-----------|---------|
| <b>8</b>  | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box. .... ► <input checked="" type="checkbox"/>                   |           |         |
| <b>a</b>  | Home mortgage interest and points reported to you on Form 1098. See instructions if limited. .... See St. 1   | <b>8a</b> | 23,114. |
| <b>b</b>  | Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ► ..... | <b>8b</b> |         |
| <b>c</b>  | Points not reported to you on Form 1098. See instructions for special rules. ....   | <b>8c</b> |         |
| <b>d</b>  | Mortgage insurance premiums (see instructions) .....  | <b>8d</b> |         |
| <b>e</b>  | Add lines 8a through 8d .....   | <b>8e</b> | 23,114. |
| <b>9</b>  | Investment interest. Attach Form 4952 if required. See instructions .....   | <b>9</b>  |         |
| <b>10</b> | Add lines 8e and 9 .....  | <b>10</b> | 23,114. |

**Gifts to  
Charity****Caution:** If you made a gift and got a benefit for it, see instructions.

- |           |  |           |        |
|-----------|--|-----------|--------|
| <b>11</b> | Gifts by cash or check. If you made any gift of \$250 or more, see instructions. .... Statement . 2  | <b>11</b> | 700.   |
| <b>12</b> | Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500. .... | <b>12</b> | 1,500. |
| <b>13</b> | Carryover from prior year .....  | <b>13</b> |        |
| <b>14</b> | Add lines 11 through 13 .....  | <b>14</b> | 2,200. |

**Casualty and  
Theft Losses**

- |           |  |           |    |
|-----------|--|-----------|----|
| <b>15</b> | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions. .... | <b>15</b> | 0. |
|-----------|--|-----------|----|

**Other  
Itemized  
Deductions**

- |           |   |           |    |
|-----------|---|-----------|----|
| <b>16</b> | Other—from list in instructions. List type and amount ► ..... | <b>16</b> | 0. |
|-----------|---|-----------|----|

**Total  
Itemized  
Deductions**

- |           |  |           |         |
|-----------|--|-----------|---------|
| <b>17</b> | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12a. ....            | <b>17</b> | 35,314. |
| <b>18</b> | If you elect to itemize deductions even though they are less than your standard deduction, check this box. .... ► <input type="checkbox"/> |           |         |

FDIA0301L 08/20/21

0:20-cv-01534-DSD-ECW

**SCHEDULE B**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Interest and Ordinary Dividends**

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **08**► Go to [www.irs.gov/ScheduleB](http://www.irs.gov/ScheduleB) for instructions and the latest information.  
► Attach to Form 1040 or 1040-SR.

Name(s) shown on return

Daniel'la Deering

Your social security number

**Part I****Interest**(See instructions  
and the  
Instructions for  
Form 1040,  
line 2b.)**Note:** If you  
received a Form  
1099-INT, Form  
1099-OID, or  
substitute statement  
from a brokerage  
firm, list the firm's  
name as the payer  
and enter the total  
interest shown on  
that form.

- 1**
- List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ►

**Amount****1**

- 2**
- Add the amounts on line 1.
- 
- 3**
- Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815.
- 
- 4**
- Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b. ►

**2****3****4**

0.

**Note:** If line 4 is over \$1,500, you must complete Part III.**Amount****Part II****Ordinary Dividends**(See instructions  
and the  
Instructions for  
Form 1040,  
line 3b.)**Note:** If you  
received a Form  
1099-DIV or  
substitute statement  
from a brokerage  
firm, list the firm's  
name as the payer  
and enter the  
ordinary dividends  
shown on that form.

- 5**
- List name of payer ►
- 
- Ameriprise x0424
- 
- Ameriprise x6591

**5**

91.

4,048.

- 6**
- Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b. ►

**6**

4,139.

**Note:** If line 6 is over \$1,500, you must complete Part III.**Part III****Foreign Accounts and Trusts****Caution:** If required,  
failure to file FinCEN  
Form 114 may  
result in  
substantial  
penalties. See  
instructions.You must complete this part if you **(a)** had over \$1,500 of taxable interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.**Yes****No**

- 7a**
- At any time during 2021, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions.

If 'Yes,' are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements.

- b**
- If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ►

- 8**
- During 2021, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If 'Yes,' you may have to file Form 3520. See instructions.

X

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.**

FDIA0401L 11/05/21

**Schedule B (Form 1040) 2021**

0:20-cv-01534-DSD-ECW

DD00003584

**SCHEDULE D**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Capital Gains and Losses**▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**▶ **Go to [www.irs.gov/ScheduleD](http://www.irs.gov/ScheduleD) for instructions and the latest information.**▶ **Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.**

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **12**

Name(s) shown on return

Daniel'la Deering

Your social security number

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 .....				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back .....				<b>7</b>

**Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 .....				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				<b>12</b>
<b>13</b> Capital gain distributions. See the instrs. ....				<b>13</b> 8,945.
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				<b>14</b> ( )
<b>15</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then, go to Part III on the back .....				<b>15</b> 8,945.

**Part III Summary**

<b>16</b> Combine lines 7 and 15 and enter the result. ....	<b>16</b>	8,945.
<ul style="list-style-type: none"><li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li><li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li><li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li></ul>		
<b>17</b> Are lines 15 and 16 <b>both</b> gains? <input checked="" type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.		
<b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet. ....	<b>18</b>	0.
<b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet. ....	<b>19</b>	4.
<b>20</b> Are lines 18 and 19 <b>both</b> zero or blank and are you not filing Form 4952? <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16. <b>Don't</b> complete lines 21 and 22 below. <input checked="" type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.		
<b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of: <ul style="list-style-type: none"><li>• The loss on line 16; or</li><li>• (\$3,000), or if married filing separately, (\$1,500)</li></ul>	<b>21</b>	( )
<b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.		
<b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16. <input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2021

Form **1116****Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.

OMB No. 1545-0121

**2021**Attachment  
Sequence No. **19**Department of the Treasury  
Internal Revenue Service (99)

Name

Daniel'la Deering

ID no. as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income    c ☒ Passive category income    e ☐ Section 901(j) income    g ☐ Lump-sum distributions  
 b ☐ Foreign branch category income    d ☐ General category income    f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I Taxable Income or Loss From Sources Outside the United States** (for category checked above)

	Foreign Country or U.S. Possession			Total (Add columns A, B, and C.)
	A	B	C	
<b>i Enter the name of the foreign country or U.S. possession.</b> ▶ OTHER COUNTRY	OTHER COUNTRY	OTHER COUNTRY (VARIOUS)		
<b>1 a</b> Gross income from sources within country shown above and of the type checked above (see instructions): See Statement 3				
	6,180.			1 a 6,180.
<b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions. ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
<b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement).....				
<b>3</b> Pro rata share of other deductions <b>not definitely related:</b>				
<b>a</b> Certain itemized deductions or standard deduction (see instructions).....	5,571.	5,571.		
<b>b</b> Other deductions (attach statement).....				
<b>c</b> Add lines 3a and 3b.....	5,571.	5,571.		
<b>d</b> Gross foreign source income (see instructions).....	12,434.			
<b>e</b> Gross income from all sources (see instructions).....	342,839.	342,839.		
<b>f</b> Divide line 3d by line 3e (see instructions).....	0.036268			
<b>g</b> Multiply line 3c by line 3f.....	202.			
<b>4</b> Pro rata share of interest expense (see instructions):				
<b>a</b> Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions).....	838.			
<b>b</b> Other interest expense.....				
<b>5</b> Losses from foreign sources.....				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5.....	1,040.			6 1,040.
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 15, page 2..... ▶				7 5,140.

**Part II Foreign Taxes Paid or Accrued** (see instructions)

C O U N T R Y	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add columns (q) through (t))	
		(l) Date paid or accrued	(m) Dividends	(n) Rents & royalties		(o) Interest		(q) Dividends			(r) Rents & royalties
A	1099 taxes						53.				53.
B											
C											

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2..... ▶ 8 53.

BAA For Paperwork Reduction Act Notice, see instructions.

FDIZ2612L 09/21/21

Form 1116 (2021)



Form 1116 (2021) Daniel'la Deering

Page 2

**Part III Figuring the Credit**

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I. ....	9	53.	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. .... (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10		
11	Add lines 9 and 10. ....	11	53.	
12	Reduction in foreign taxes (see instructions). ....	12	( )	
13	Taxes reclassified under high tax kickout (see instructions). ....	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit. ....	14		53.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions. ....	15	5,140.	
16	Adjustments to line 15 (see instructions). ....	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.) ....	17	5,140.	
18	<b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption. ....	18	300,900.	
	<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1". ....	19		0.017082087
20	<b>Individuals:</b> Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. ....	20		79,949.
	<b>Caution:</b> If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit). ....	21		1,366.
22	Increase in limitation (section 960(c)) ....	22		
23	Add lines 21 and 22. ....	23		1,366.
24	Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See instructions. ....	24		53.

**Part IV Summary of Credits From Separate Parts III** (see instructions)

25	Credit for taxes on section 951A category income. ....	25		
26	Credit for taxes on foreign branch category income. ....	26		
27	Credit for taxes on passive category income. ....	27		
28	Credit for taxes on general category income. ....	28		
29	Credit for taxes on section 901(j) income. ....	29		
30	Credit for taxes on certain income re-sourced by treaty. ....	30		
31	Credit for taxes on lump-sum distributions. ....	31		
32	Add lines 25 through 31. ....	32		
33	Enter the <b>smaller</b> of line 20 or line 32. ....	33		53.
34	Reduction of credit for international boycott operations. See instructions for line 12. ....	34		
35	Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a. ....	35		53.

Form 1116 (2021)

0:20-cv-01534-DSD-ECW

Form **5329****Additional Taxes on Qualified Plans  
(Including IRAs) and Other Tax-Favored Accounts**

OMB No. 1545-0074

**2021**Department of the Treasury  
Internal Revenue Service (99)

► **Attach to Form 1040, 1040-SR, or 1040-NR.**  
 ► **Go to [www.irs.gov/Form5329](http://www.irs.gov/Form5329) for instructions and the latest information.**

Attachment  
Sequence No. **29**

Name of individual subject to additional tax. If married filing jointly, see instructions.

Daniel'la Deering

Your social security number

[REDACTED]

Apt. no.

**Fill in Your Address Only  
if You Are Filing This  
Form by Itself and Not  
With Your Tax Return**

Home address (number and street), or P.O. box if mail is not delivered to your home

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below. See instructions.

If this is an amended  
return, check here ► ☐

Foreign country name

Foreign province/state/county

Foreign postal code

If you **only** owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions.

**Part I Additional Tax on Early Distributions.**

Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 59-1/2 from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040) — see above). You may also have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions.

1	Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions . . . . .	1	101,190.
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions: . . . . .	2	
3	Amount subject to additional tax. Subtract line 2 from line 1. . . . .	3	101,190.
4	<b>Additional tax.</b> Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . . . .	4	10,119.
<b>Caution:</b> If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions.			

**Part II Additional Tax on Certain Distributions From Education Accounts and ABLER Accounts.**

Complete this part if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings account (ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8p, from an ABLER account.

5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLER account . . . . .	5	
6	Distributions included on line 5 that are not subject to the additional tax (see instructions). . . . .	6	
7	Amount subject to additional tax. Subtract line 6 from line 5. . . . .	7	
8	<b>Additional tax.</b> Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8 . . . . .	8	

**Part III Additional Tax on Excess Contributions to Traditional IRAs.**

Complete this part if you contributed more to your traditional IRAs for 2021 than is allowable or you had an amount on line 17 of your 2020 Form 5329.

9	Enter your excess contributions from line 16 of your 2020 Form 5329. See instructions. If zero, go to line 15. . . . .	9	
10	If your traditional IRA contributions for 2021 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0- . . . . .	10	
11	2021 traditional IRA distributions included in income (see instructions) . . . . .	11	
12	2021 distributions of prior year excess contributions (see instructions) . . . . .	12	
13	Add lines 10, 11, and 12. . . . .	13	
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0- . . . . .	14	
15	Excess contributions for 2021 (see instructions). . . . .	15	
16	Total excess contributions. Add lines 14 and 15. . . . .	16	
17	<b>Additional tax.</b> Enter 6% (0.06) of the <b>smaller</b> of line 16 <b>or</b> the value of your traditional IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8. . . . .	17	

**Part IV Additional Tax on Excess Contributions to Roth IRAs.**

Complete this part if you contributed more to your Roth IRAs for 2021 than is allowable or you had an amount on line 25 of your 2020 Form 5329.

18	Enter your excess contributions from line 24 of your 2020 Form 5329. See instructions. If zero, go to line 23. . . . .	18	
19	If your Roth IRA contributions for 2021 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0- . . . . .	19	
20	2021 distributions from your Roth IRAs (see instructions) . . . . .	20	
21	Add lines 19 and 20. . . . .	21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0- . . . . .	22	
23	Excess contributions for 2021 (see instructions). . . . .	23	
24	Total excess contributions. Add lines 22 and 23. . . . .	24	
25	<b>Additional tax.</b> Enter 6% (0.06) of the <b>smaller</b> of line 24 <b>or</b> the value of your Roth IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8. . . . .	25	

BAA For Privacy Act and Paperwork Reduction Act Notice, see your tax return instructions.

FDIA5012L 08/10/21

Form **5329** (2021)

0:20-cv-01534-DSD-ECW

DD00003589

0:20-cv-01534-DSD-ECW

Form **8889****Health Savings Accounts (HSAs)**

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **52**Department of the Treasury  
Internal Revenue Service

► **Attach to Form 1040, 1040-SR, or 1040-NR.**  
 ► **Go to [www.irs.gov/Form8889](https://www.irs.gov/Form8889) for instructions and the latest information.**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Social security number of HSA  
beneficiary. If both spouses have  
HSAs, see instructions ►

Daniel'la Deering

**Before you begin:** Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.**Part I HSA Contributions and Deduction.** See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions	<input type="checkbox"/> Self-only	<input checked="" type="checkbox"/> Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions.	2	
3	If you were under age 55 at the end of 2021 and, on the first day of <b>every</b> month during 2021, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,600 (\$7,200 for family coverage). <b>All others</b> , see the instructions for the amount to enter.	3	8,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs.	4	
5	Subtract line 4 from line 3. If zero or less, enter -0-	5	8,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter.	6	8,200.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions.	7	
8	Add lines 6 and 7.	8	8,200.
9	Employer contributions made to your HSAs for 2021	9	1,233.
10	Qualified HSA funding distributions	10	
11	Add lines 9 and 10.	11	1,233.
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	6,967.
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13. <b>Caution:</b> If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	13	

**Part II HSA Distributions.** If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2021 from all HSAs (see instructions).	14a	1,233.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions.	14b	
c	Subtract line 14b from line 14a.	14c	1,233.
15	Qualified medical expenses paid using HSA distributions (see instructions).	15	1,233.
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16	0.
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here		
b	<b>Additional 20% tax</b> (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	

**Part III Income and Additional Tax for Failure To Maintain HDHP Coverage.** See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule.	18	
19	Qualified HSA funding distribution	19	
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line.	20	
21	<b>Additional tax.</b> Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.**

FDIA2512L 07/29/21

Form **8889** (2021)

Form **8995-A****Qualified Business Income Deduction**

OMB No. 1545-2294

**2021**Attachment  
Sequence No. **55A**Department of the Treasury  
Internal Revenue Service

► Attach to your tax return.

► Go to [www.irs.gov/Form8995A](http://www.irs.gov/Form8995A) for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

Daniel'la Deering

**Note:** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is above \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

**Part I Trade, Business, or Aggregation Information**

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
B		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
C		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

**Part II Determine Your Adjusted Qualified Business Income**

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions. . . . .	2		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$164,900 or less (\$164,925 if married filing separately; \$329,800 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13. . . . .	3		
4 Allocable share of W-2 wages from the trade, business, or aggregation. . . . .	4		
5 Multiply line 4 by 50% (0.50). . . . .	5		
6 Multiply line 4 by 25% (0.25). . . . .	6		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property. . . . .	7		
8 Multiply line 7 by 2.5% (0.025). . . . .	8		
9 Add lines 6 and 8. . . . .	9		
10 Enter the greater of line 5 or line 9. . . . .	10		
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10. . . . .	11		
12 Phased-in reduction. Enter the amount from line 26, if any. . . . .	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12. . . . .	13		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions. . . . .	14		
15 Qualified business income component. Subtract line 14 from line 13. . . . .	15		
16 Total qualified business income component. Add all amounts reported on line 15. . . . . ►	16		

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **8995-A** (2021)

**Part III** **Phased-in Reduction**

Complete Part III only if your taxable income is more than \$164,900 but not \$214,900 (\$164,925 and \$214,925 if married filing separately; \$329,800 and \$429,800 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

			A	B	C
17	Enter the amounts from line 3.....	17			
18	Enter the amounts from line 10.....	18			
19	Subtract line 18 from line 17.....	19			
20	Taxable income before qualified business income deduction.....	20			
21	Threshold. Enter \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly).....	21			
22	Subtract line 21 from line 20.....	22			
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly).....	23			
24	Phase-in percentage. Divide ln 22 by ln 23.....	24	%		
25	Total phase-in reduction. Multiply line 19 by line 24.....	25			
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business.....	26			

**Part IV** **Determine Your Qualified Business Income Deduction**

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16.....	27			
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions.....	28	200.		
29	Qualified REIT dividends and PTP (loss) carryforward from prior years.....	29	( )		
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-.....	30	200.		
31	REIT and PTP component. Multiply line 30 by 20% (0.20).....	31	40.		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31.....	32			40.
33	Taxable income before qualified business income deduction.....	33	307,525.		
34	Net capital gain. See instructions.....	34	11,077.		
35	Subtract line 34 from line 33. If zero or less, enter -0-.....	35			296,448.
36	Income limitation. Multiply line 35 by 20% (0.20).....	36			59,290.
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36.....	37			40.
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37.....	38			
39	Total qualified business income deduction. Add lines 37 and 38.....	39			40.
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-.....	40	( )		

Form 8995-A (2021)

Form **8959**Department of the Treasury  
Internal Revenue Service**Additional Medicare Tax**

OMB No. 1545-0074

**2021**Attachment  
Sequence No. **71**

- If any line does not apply to you, leave it blank. See separate instructions.  
► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.  
► Go to [www.irs.gov/Form8959](http://www.irs.gov/Form8959) for instructions and the latest information.

Name(s) shown on return

Daniel 'la Deering

Your social security number

**Part I Additional Medicare Tax on Medicare Wages**

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5...	1	210,464.	
2	Unreported tips from Form 4137, line 6.	2		
3	Wages from Form 8919, line 6.	3		
4	Add lines 1 through 3.	4	210,464.	
5	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	5	200,000.	
6	Subtract line 5 from line 4. If zero or less, enter -0-	6		10,464.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II.	7		94.

**Part II Additional Medicare Tax on Self-Employment Income**

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions).	8		
9	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	9		
10	Enter the amount from line 4.	10		
11	Subtract line 10 from line 9. If zero or less, enter -0-	11		
12	Subtract line 11 from line 8. If zero or less, enter -0-	12		
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III.	13		

**Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation**

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions).	14		
15	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	15		
16	Subtract line 15 from line 14. If zero or less, enter -0-	16		
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV.	17		

**Part IV Total Additional Medicare Tax**

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V.	18		94.
----	--	----	--	-----

**Part V Withholding Reconciliation**

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6.	19	3,052.	
20	Enter the amount from line 1.	20	210,464.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages.	21	3,052.	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages.	22		
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions).	23		
24	<b>Total Additional Medicare Tax withholding.</b> Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions).	24		



0:20-cv-01534-DSD-ECW

Form **8960**Department of the Treasury  
Internal Revenue Service (99)**Net Investment Income Tax –  
Individuals, Estates, and Trusts**

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form8960](http://www.irs.gov/Form8960) for instructions and the latest information.

OMB No. 1545-2227

**2021**Attachment  
Sequence No. **72**

Name(s) shown on your tax return

Daniel'la Deering

Your social security number or EIN

**Part I Investment Income**

- ☐ Section 6013(g) election (see instructions)
- ☐ Section 6013(h) election (see instructions)
- ☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions) .....	1	
2	Ordinary dividends (see instructions) .....	2	4,139.
3	Annuities (see instructions) .....	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions) .....	4a	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) .....	4b	
c	Combine lines 4a and 4b .....	4c	
5a	Net gain or loss from disposition of property (see instructions) .....	5a	8,945.
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions) .....	5b	
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions) .....	5c	
d	Combine lines 5a through 5c .....	5d	8,945.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions) .....	6	
7	Other modifications to investment income (see instructions) .....	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7 .....	8	13,084.

**Part II Investment Expenses Allocable to Investment Income and Modifications**

9a	Investment interest expenses (see instructions) .....	9a	
b	State, local, and foreign income tax (see instructions) .....	9b	476.
c	Miscellaneous investment expenses (see instructions) .....	9c	
d	Add lines 9a, 9b, and 9c .....	9d	476.
10	Additional modifications (see instructions) .....	10	
11	Total deductions and modifications. Add lines 9d and 10 .....	11	476.

**Part III Tax Computation**

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0- .....	12	12,608.
<b>Individuals:</b>			
13	Modified adjusted gross income (see instructions) .....	13	342,839.
14	Threshold based on filing status (see instructions) .....	14	200,000.
15	Subtract line 14 from line 13. If zero or less, enter -0- .....	15	142,839.
16	Enter the smaller of line 12 or line 15 .....	16	12,608.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). <b>Enter here and include on your tax return</b> (see instructions) .....	17	479.
<b>Estates and Trusts:</b>			
18a	Net investment income (line 12 above) .....	18a	
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions) .....	18b	
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0- .....	18c	
19a	Adjusted gross income (see instructions) .....	19a	
b	Highest tax bracket for estates and trusts for the year (see instructions) .....	19b	
c	Subtract line 19b from line 19a. If zero or less, enter -0- .....	19c	
20	Enter the smaller of line 18c or line 19c .....	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). <b>Enter here and include on your tax return</b> (see instructions) .....	21	

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8960** (2021)

0:20-cv-01534-DSD-ECW

Form **8283**(Rev. December 2021)  
Department of the Treasury  
Internal Revenue Service**Noncash Charitable Contributions**

► **Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.**

► **Go to [www.irs.gov/Form8283](http://www.irs.gov/Form8283) for instructions and the latest information.**

OMB No. 1545-0074

Attachment  
Sequence No. **155**

Name(s) shown on your income tax return

Daniel'la Deering

Identifying number

**Note:** Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

**Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities** — List in this section **only** an item (or a group of similar items) for which you claimed a deduction of \$5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than \$5,000. See instructions.

**Part I Information on Donated Property** — If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	Goodwill Industries 20 West 12th Street St Paul, MN 55155	<input type="checkbox"/>	Household & Clothing
B		<input type="checkbox"/>	
C		<input type="checkbox"/>	
D		<input type="checkbox"/>	
E		<input type="checkbox"/>	

**Note:** If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A	9/14/21	Various	Purchase	4,500.	1,500.	Thrift Shop Value
B						
C						
D						
E						

**Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A)** — Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions.

**Part I Information on Donated Property**

2 Check the box that describes the type of property donated.

- |  |  |   |
|--|--|---|
| a <input type="checkbox"/> Art* (contribution of \$20,000 or more)   | e <input type="checkbox"/> Other Real Estate     | i <input type="checkbox"/> Vehicles                     |
| b <input type="checkbox"/> Qualified Conservation Contribution       | f <input type="checkbox"/> Securities            | j <input type="checkbox"/> Clothing and household items |
| c <input type="checkbox"/> Equipment                                 | g <input type="checkbox"/> Collectibles**        | k <input type="checkbox"/> Other                        |
| d <input type="checkbox"/> Art* (contribution of less than \$20,000) | h <input type="checkbox"/> Intellectual Property |   |

\* Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

\*\* Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.

**Note:** In certain cases, you must attach a qualified appraisal of the property. See instructions.

3	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If any tangible personal property or real property was donated, give a brief summary of the overall physical condition of the property at the time of the gift.	(c) Appraised fair market value
A			
B			
C			

	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
A						
B						
C						

**BAA For Paperwork Reduction Act Notice, see separate instructions.**

FDIZ1812L 09/22/21

Form **8283** (Rev. 12-2021)

0:20-cv-01534-DSD-ECW

DD00003595



0:20-cv-01534-DSD-ECW

Form **8915-F**

(January 2022)

Department of the Treasury  
Internal Revenue Service**Qualified Disaster Retirement Plan  
Distributions and Repayments**

- Go to [www.irs.gov/Form8915F](http://www.irs.gov/Form8915F) for instructions and the latest information.  
► Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

Attachment  
Sequence No. **915**

Name. If married, file a separate form for each spouse required to file Form 8915-F. See instructions.

Daniel'la Deering

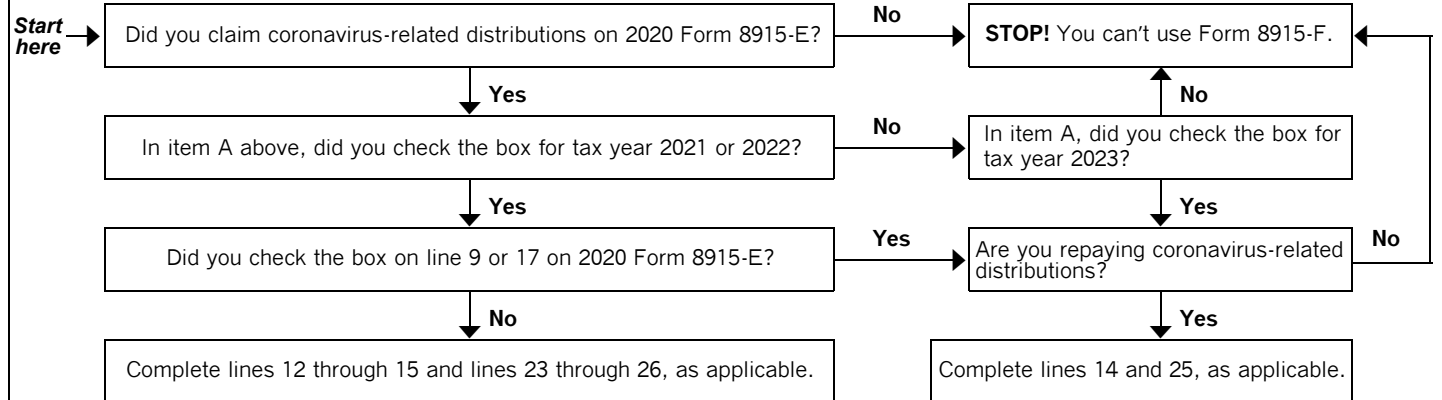
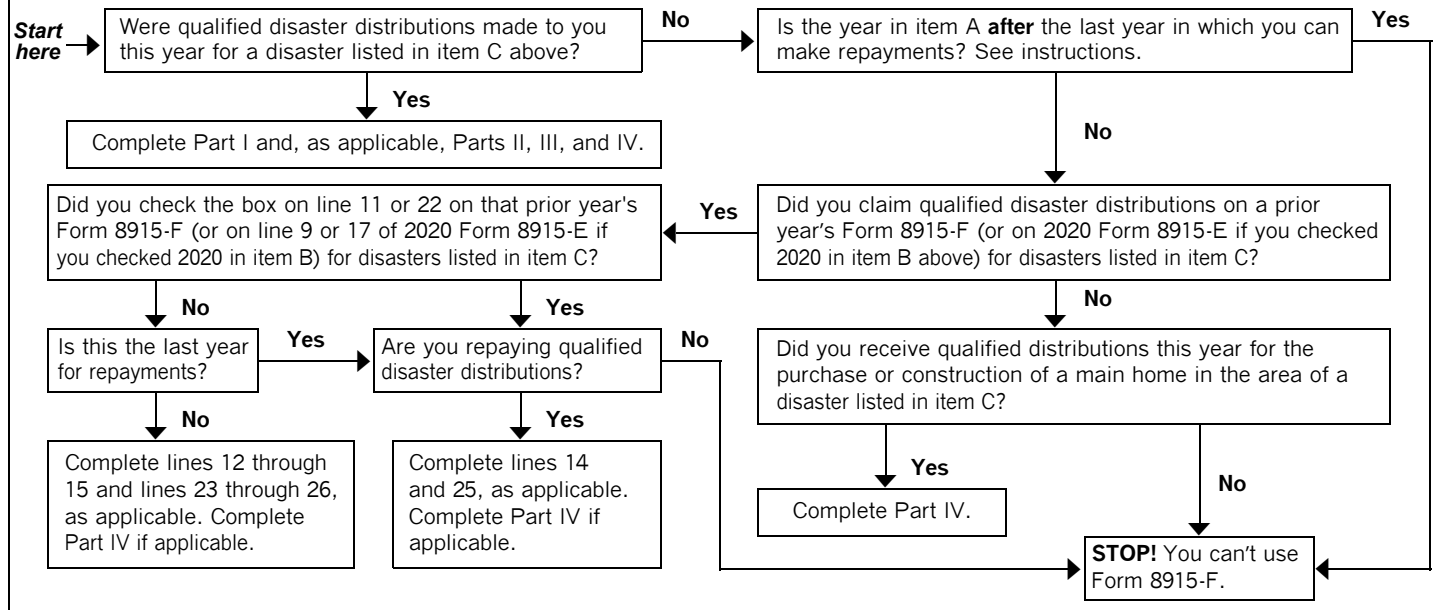
Your social security number

**Before you begin (see instructions for details):**

- Form 8915-F replaces Form 8915-E for 2021 and later years. Form 8915-E was used for coronavirus-related and other 2020 disaster distributions.
- Form 8915-F is also used for 2021 and later disaster distributions.
- See Appendix B in the instructions for the list of qualified disasters and their FEMA numbers for the year you check in item B next.
- "This year" (as used on this form) is the year of the form you check in item A next. For example, if you check 2021, "this year" is 2021.

**Complete items A and B below. Complete item C and check the box in item D for the coronavirus, as applicable.**

- A Tax year for which you are filing form** (check only one box) ► ☒ 2021 ☐ 2022 ☐ 2023 ☐ 2024 ☐ Other \_\_\_\_\_
- B Calendar year in which disaster occurred** (check only one box) ► ☒ 2020 ☐ 2021 ☐ 2022 ☐ 2023 ☐ Other \_\_\_\_\_
- C FEMA number for each of your disasters for the year checked in item B above.** Use item D, **not** item C, for the coronavirus.
- (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_ (5) \_\_\_\_\_ (6) \_\_\_\_\_
- D If your disaster is the coronavirus, check this box** ► ☒ Don't list the coronavirus in item C.

**Which lines on this form should I use? See CHARTS 1 and 2 below.****CHART 1: Use if you checked the box for coronavirus in item D above and you *don't* have any disaster in item C.****CHART 2: Use if CHART 1 doesn't apply to you. See the instructions for specific details.**

Form 8915-F (1-2022)

Daniel 'la Deering

Page 2

**Part I Total Distributions From All Retirement Plans (Including IRAs)** (see instructions)

Provide the information requested below for the disasters in item C earlier for which you are reporting qualified disaster distributions in this part.

Disaster FEMA number*	Disaster beginning date*	Disaster ending date*

\*See Appendix B at the end of the instructions for the FEMA number, and for disaster beginning and ending dates. If more than two disasters, see instructions and check this box. ☐

Date first distribution made this year ▶ \_\_\_\_\_

Date last distribution made this year ▶ \_\_\_\_\_

**Complete lines 1a through 1e first. If line 1e is zero, stop. Do not complete Part I.****1 Qualified disaster distribution limits (see instructions).****a** Do the following.

- Skip lines 1a through 1d. And, on line 1e, enter \$100,000 times the number of disasters you entered in item C earlier **if**:
  - You checked 2020 in item B earlier and either you didn't file 2020 Form 8915-E or you only reported the coronavirus disaster on 2020 Form 8915-E, **or**
  - You checked a year other than 2020 in item B and this is the first year you are filing a Form 8915-F for disasters for the year checked in item B.
- **Otherwise**, on line 1a, enter \$100,000 times the number of different qualified disasters you have reported in item C on prior-year Forms 8915-F for disasters for the year you checked in item B. (Include, in your disaster number, if you checked 2020 in item B, qualified disaster(s) (other than the coronavirus) reported in Part I of 2020 Form 8915-E.) Also, complete lines 1b through 1e. ....

**b** Enter the total qualified disaster distributions made to you in prior year(s) for all disasters (except the coronavirus) for the year you checked in item B. ....**c** Subtract line 1b from line 1a. ....**d** Enter \$100,000 times the number of qualified disasters, for the year checked in item B, that you reported in item C but didn't report in item C on a prior year's Form 8915-F, or in Part I of 2020 Form 8915-E if you checked 2020 in item B. Don't count the coronavirus in the number of qualified disasters. ....**e Total available qualified disaster distribution amount for this year.** Enter the sum of lines 1c and 1d. **If the amount on line 1e is zero, do NOT complete Part I** .....**2** Enter, in column (a), distributions from retirement plans (other than IRAs) made this year. .**3** Enter, in column (a), distributions from traditional, SEP, and SIMPLE IRAs made this year. .**4** Enter, in column (a), distributions from Roth IRAs made this year. ....**5** Enter on line 5, column (a), the sum of lines 2 through 4 in column (a). If the amount on line 5, column (a):

- Is not greater than the amount on line 1e, enter on lines 2 through 5 in column (b) the amounts from lines 2 through 5, respectively, in column (a).
- Is greater than the amount on line 1e, enter on line 5, column (b), the amount from line 1e. Enter on lines 2 through 4 in column (b) the amounts from lines 2 through 4, respectively, in column (a) **adjusted** by any reasonable method so that the sum of lines 2 through 4 in column (b) equals the amount on line 5, column (b).

See instructions .....

**6** Total qualified disaster distributions. Enter the amount from line 5, column (b). The 10% additional tax (25% for SIMPLE IRAs) for early withdrawals is waived for this amount. See Parts II and III, later, for the tax on this amount .....**7 Taxable amount.** Enter the excess of the amount on line 5, column (a), over the amount on line 6. Report this excess as IRA and/or pension and annuity distributions, as applicable, in accordance with the instructions for your tax return. All or part of the amount on line 7 may be eligible for the tax benefits in Part IV. See instructions. ....

(a) Available distributions for this year (see instructions)	(b) Qualified disaster distributions for the disasters in item C (see instructions)
--	---

1a		
1b		
1c		
1d		
1e		
2		
3		
4		
5		
6		
7		

Form 8915-F (1-2022)

**Part II Qualified Disaster Distributions From Retirement Plans (Other Than IRAs) for the Coronavirus and Disaster(s) Listed in Item C**

8	Did you enter an amount on line 2, column (b)? <input checked="" type="checkbox"/> <b>No.</b> Skip lines 8 through 11, and go to line 12. <input type="checkbox"/> <b>Yes.</b> Enter the amount from line 2, column (b)	8	
9	Enter the applicable cost of distributions, if any. See instructions	9	
10	Subtract line 9 from line 8. This is the taxable amount of your other-than-IRA retirement plan qualified disaster distributions	10	
11	The entire taxable amount on line 10 will be spread over 3 years unless you elect to have it taxed in this year. <b>If you elect NOT to spread the taxable amount over 3 years, check this box</b> <input type="checkbox"/> <b>and enter the amount from line 10 (see instructions). Otherwise, enter the amount from line 10 divided by 3.0.</b> You must check the box on this line if you check the box on line 22	11	
12	Enter the amount, if any, from Worksheet 2 in the instructions. This is your income for prior years from other-than-IRA retirement plan qualified disaster distributions	12	28,511.
13	Add lines 11 and 12. This is your total income this year from other-than-IRA retirement plan qualified disaster distributions	13	28,511.
14	<b>Total repayment.</b> Enter the amount, if any, from Worksheet 3. This is your total repayment for this year of other-than-IRA retirement plan qualified disaster distributions	14	
15	<b>Amount subject to tax this year.</b> Subtract line 14 from line 13. If zero or less, enter -0-. Include this amount in the total on line 5b of this year's Form 1040, 1040-SR, or 1040-NR. See instructions	15	28,511.

**Before you begin:** Complete this year's Form 8606, Nondeductible IRAs, if required.**Part III Qualified Disaster Distributions From Traditional, SEP, SIMPLE, and Roth IRAs for the Coronavirus and Disaster(s) Listed in Item C**

16	Did you enter an amount on line 3, column (b), or line 4, column (b)? <input type="checkbox"/> <b>Yes.</b> Go to line 17. <input type="checkbox"/> <b>No.</b> Skip lines 17 through 22, and go to line 23.		
17	Did you receive a qualified disaster distribution from a traditional, SEP, SIMPLE, or Roth IRA that is required to be reported on this year's Form 8606? <input type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> Skip lines 18 and 19, and go to line 20.		
18	Enter the amount, if any, from this year's Form 8606, line 15b. But if you are entering amounts here and on other Forms 8915-F for this year, only enter on line 18 the amount on Form 8606, line 15b, attributable to Form 8915-F distributions for this form. See the instructions for Form 8606, line 15b	18	
19	Enter the amount, if any, from this year's Form 8606, line 25b. But if you are entering amounts here and on other Forms 8915-F for this year, only enter on line 19 the amount on Form 8606, line 25b, attributable to Form 8915-F distributions for this form. See the instructions for Form 8606, line 25b	19	
20	Enter the amount from line 3, column (b), if any. Don't include on line 20 any amounts reported on Form 8606	20	
21	Add lines 18, 19, and 20. This is the taxable amount of your IRA qualified disaster distributions	21	
22	The entire taxable amount on line 21 will be spread over 3 years unless you elect to have it taxed in this year. <b>If you elect NOT to spread the taxable amount over 3 years, check this box</b> <input type="checkbox"/> <b>and enter the amount from line 21 (see instructions). Otherwise, enter the amount from line 21 divided by 3.0.</b> You must check the box on this line if you check the box on line 11	22	
23	Enter the amount, if any, from Worksheet 4 in the instructions. This is your income for prior years from IRA qualified disaster distributions	23	
24	Add lines 22 and 23. This is your total income this year from IRA qualified disaster distributions	24	
25	<b>Total repayment.</b> Enter the amount, if any, from Worksheet 5. This is your total repayment for this year of IRA qualified disaster distributions	25	
26	<b>Amount subject to tax.</b> Subtract line 25 from line 24. If zero or less, enter -0-. Include this amount in the total on line 4b of this year's Form 1040, 1040-SR, or 1040-NR. See instructions	26	

Form 8915-F (1-2022)

**Before you begin:** Complete this year's Form 8606, Nondeductible IRAs, if required.**Part IV Qualified Distributions for the Purchase or Construction of a Main Home in the Area of Disaster(s) Listed in Item C****Caution:** Complete Part IV if, this year, you received a qualified distribution (as defined in the instructions) for a disaster listed in item C earlier. If you repay the distribution, in whole or in part, after this year, see the instructions. For the applicability of Part IV to other years for disasters listed in item C, see the instructions.

Disaster FEMA number*	Disaster beginning date*	Disaster ending date*

\*See Appendix B at the end of the instructions for the FEMA number, and for disaster beginning and ending dates.

Date first distribution received this year ► \_\_\_\_\_ Date last distribution received this year ► \_\_\_\_\_

**27** Did you receive a qualified distribution from a traditional, SEP, SIMPLE, or Roth IRA that is required to be reported on this year's Form 8606?☐ **Yes.** Complete lines 28 through 32 only if you also had qualified distributions not required to be reported on this year's Form 8606; otherwise, stop here.☐ **No.** Go to line 28.**28** Enter the total amount of qualified distributions you received this year for the purchase or construction of a main home. Don't include any amounts reported on this year's Form 8606. Also, don't include any distributions you reported on line 8 or 20, or on other Forms 8915 for this year, if any. .... **28****29** Enter the applicable cost of distributions, if any. See instructions. .... **29****30** Subtract line 29 from line 28. .... **30****31** Enter the total amount of any repayments you made. See instructions for allowable repayments. Don't include any repayments treated as rollovers on this year's Form 8606. See instructions. .... **31****32 Taxable amount.** Subtract line 31 from line 30. If the distribution is:

- From an IRA, include this amount in the total on line 4b of this year's Form 1040, 1040-SR, or 1040-NR.
- From a retirement plan (other than an IRA), include this amount in the total on line 5b of this year's Form 1040, 1040-SR, or 1040-NR.

**32****Note:** You may be subject to an additional tax on the amount on line 32. See instructions.

Form 8915-F (1-2022)

2021

Federal Statements

Page 1

Daniel'la Deering

Statement 1  
Schedule A, Line 8a  
Home Mortgage Interest Reported on Form 1098

.....	\$	23,114.
Total	\$	<u>23,114.</u>

Statement 2  
Schedule A, Line 11  
Contributions by Cash or Check

Way to grow.....	\$	700.
Total	\$	<u>700.</u>

Statement 3  
Form 1116, Line 1a - Passive Category Income  
Gross Income From Sources Outside U.S.

Foreign country or U.S. possession: OTHER COUNTRY

Dividends.....	\$	1,916.
Gross Foreign Source Qualified Dividends.....	2,132.	
Foreign Source Qualified Dividend Adjustment.....	<u>-1,268.</u>	
Net Foreign Source Qualified Dividends.....		864.
Capital Gain Distributions.....	8,386.	
Capital Gain Distributions Adjustment.....	<u>-4,986.</u>	
Net Foreign Source Capital Gain Distributions.....		3,400.
Total	\$	<u>6,180.</u>

**0:20-cv-01534-DSD-ECW**

0:20-cv-01534-DSD-ECW



DO NOT FILE



## 2021 Form M1, Individual Income Tax

Do not use staples on anything you submit.

DANIEL ' LA  
Your First Name and Initial

DEERING  
Last Name

umber

Your Date of Birth (MM/DD/YYYY)

If a Joint Return, Spouse's First Name and Initial

Spouse's Last Name

Spouse's Social Security Number

Spouse's Date of Birth

1809 IRVING AVE S  
Current Home Address

Check if Address is:

☐ New ☐ Foreign

MINNEAPOLIS  
City

MN  
State

55403  
ZIP Code

## 2021 Federal Filing Status (place an X in one box):

☒ (1) Single ☐ (2) Married Filing Jointly ☐ (3) Married Filing Separately ☐ (4) Head of Household ☐ (5) Qualifying Widow(er)

Spouse Name

Spouse SSN

## Dependents (see instructions):

Dependent 1 First Name

Dependent 1 Last Name

Dependent 1 SSN

Dependent 1 Relationship to You

Dependent 2 First Name

Dependent 2 Last Name

Dependent 2 SSN

Dependent 2 Relationship to You

Dependent 3 First Name

Dependent 3 Last Name

Dependent 3 SSN

Dependent 3 Relationship to You

## State Elections Campaign Fund

DO NOT FILE

To grant \$5 to this fund, enter the code for the party of your choice. It will help candidates for state offices pay campaign expenses. This will not increase your tax or reduce your refund.

## Political Party Code Numbers:

Democratic/Farmer-Labor . . . . 12

Grassroots/Legalize Cannabis . . . 14

Legal Marijuana Now . . . . . 17

Republican . . . . . 11

Independence . . . . . 13

Libertarian . . . . . 16

General Campaign Fund . . . . . 99

Your Code Spouse's Code

## From Your Federal Return (see instructions)

200054  
A Wages, salaries, tips, etc.

129701  
B IRA, pensions, and annuities

                      
C Unemployment

307485  
D Federal taxable income

1	Federal adjusted gross income (from line 11 of federal Form 1040 and 1040-SR) . . . . .	1	■	<u>342839</u>
2	Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB (see instructions) . . . . .	2	■	<u>                    </u>
3	Add lines 1 and 2 . . . . .	3		<u>342839</u>
4	Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions) . . . . .	4	■	<u>31024</u>
5	Exemptions (determine from instructions) . . . . .	5	■	<u>                    </u>
6	State income tax refund from line 1 of federal Schedule 1 . . . . .	6	■	<u>                    </u>
7	Subtractions from line 32 of Schedule M1M and line 22 of Schedule M1MB (see instructions) . . . . .	7	■	<u>                    </u>
8	Total subtractions. Add lines 4 through 7. . . . .	8		<u>31024</u>
9	Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank . . . . .	9		<u>311815</u>
10	Tax from the table in the Form M1 instructions . . . . .	10		<u>26059</u>

2021 M1, page 2

DO NOT FILE



11	Alternative minimum tax (enclose Schedule M1MT) .....	11	■	_____
12	Add lines 10 and 11 .....	12	_____	26059
13	<b>Full-year residents:</b> Enter the amount from line 12 on line 13. Skip lines 13a and 13b. <b>Part-year residents and nonresidents:</b> From Schedule M1NR, enter the amount from line 32 on line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR) .....	13	_____	26059
	13a ■ _____ 13b ■ _____			
14	Other taxes, such as recapture amounts and the tax on lump-sum distributions (check appropriate boxes)  <input type="checkbox"/> (a) Schedule M1HOME <input type="checkbox"/> (b) Schedule M1529 <input type="checkbox"/> (c) Schedule M1LS .....	14	■	_____
15	Tax before credits. Add lines 13 and 14 .....	15	_____	26059
16	Amount from line 18 of Schedule M1C, <i>Nonrefundable Credits</i> (enclose Schedule M1C) .....	16	■	_____
17	Subtract line 16 from line 15 (if result is zero or less, leave blank) .....	17	_____	26059
18	Nongame Wildlife Fund contribution (see instructions) This will reduce your refund or increase the amount you owe .....	18	■	_____
19	Add lines 17 and 18 .....	19	_____	26059
20	<b>Minnesota income tax withheld.</b> Complete and enclose Schedule M1W to report Minnesota withholding from Forms W-2, 1099, and W-2G (do not send) .....	20	■	12473
21	Minnesota estimated tax and extension payments made for 2021 .....	21	■	_____
22	Amount from line 11 of Schedule M1REF, <i>Refundable Credits</i> (see instructions; enclose Schedule M1REF) .....	22	■	_____
23	Total payments. Add lines 20 through 22 .....	23	_____	12473
24	<b>REFUND.</b> If line 23 is more than line 19, subtract line 19 from line 23 (see instructions). For direct deposit, complete line 25. ....	24	■	_____
25	Direct deposit of your refund (you must use an account not associated with a foreign bank):  <input type="checkbox"/> Checking <input type="checkbox"/> Savings _____ Routing Number Account Number			
26	<b>AMOUNT YOU OWE.</b> If line 19 is more than line 23, subtract line 23 from line 19 (see instructions) .....	26	■	13716
27	Penalty amount from Schedule M15 (see instructions). Also subtract this amount from line 24 or add it to line 26 (enclose Schedule M15) .....	27	■	130
IF YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 28 and 29.				
28	Amount from line 24 you want sent to you .....	28	■	_____
29	Amount from line 24 you want applied to your 2022 estimated tax .....	29	■	_____

Taxpayer: I declare that this return is correct and complete to the best of my knowledge and belief.

MNIA0112L 10/19/21

Your Signature  
6512468319  
Daytime Phone  
DAVID ARMSTRONG, EA  
Paid Preparer's Signature  
9528815343  
Preparer's Daytime Phone

Spouse's Signature (If Filing Jointly)  
DAMCKINC@COMCAST.NET  
Email Address  
Date (MM/DD/YYYY)  
DAVID@WELLSTAX.COM  
Preparer's Email Address

☐ I do not want my paid preparer to file my return electronically.☒ I authorize the Minnesota Department of Revenue to discuss this tax return  
with the preparer or the third-party designee indicated on my federal return.

Include a copy of your 2021 federal return and schedules.

Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55145-0010  
WELLS, SCHLUTER, HANSON & COMPANY, INC. 1112  
7300 FRANCE AVE S STE 215  
EDINA, MN 55435

0:20-cv-01534-DSD-ECW

DD00003603



**2021 Schedule M1W, Minnesota Income Tax Withheld**

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

DANIEL 'LA  
Your First Name and InitialDEERING  
Last Name[REDACTED]  
Your Social Security Number

If a Joint Return, Spouse's First Name and Initial

Spouse's Last Name

Spouse's Social Security Number

If you received a federal Form W-2, 1099, W-2G, 1042-S, or Minnesota Schedule KPI, KS, or KF showing Minnesota income tax withheld, complete this schedule to determine line 20 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. **DO NOT** send in your Forms W-2, 1099, or W-2G; keep them with your tax records. All instructions are included on this schedule.

**1** Minnesota wages and Minnesota tax withheld on Forms W-2, other than from Forms W-2G. If you have more than five Forms W-2, complete line 5 on the back.

<b>A</b>	<b>B—Box 13</b>	<b>C—Box 15</b>	<b>D—Box 16</b>	<b>E—Box 17</b>
If the Form W-2 is for: • you, enter 1 • spouse, enter 2	If Retirement Plan box is checked, mark an X below.	Employer's seven-digit Minnesota Tax ID Number	State wages, tips, etc. (round to nearest whole dollar)	Minnesota tax withheld (round to nearest whole dollar)
a1 <u>1</u>	b1 <input type="checkbox"/>	c1 MN <u>2801170</u>	d1 <u>18060</u>	e1 <u>1330</u>
a2 <u>1</u>	b2 <input type="checkbox"/>	c2 MN <u>5702243</u>	d2 <u>3772</u>	e2 <u>18</u>
a3 <u>1</u>	b3 <input checked="" type="checkbox"/>	c3 MN <u>3381709</u>	d3 <u>131322</u>	e3 <u>8000</u>
a4 <u>1</u>	b4 <input checked="" type="checkbox"/>	c4 MN <u>2087807</u>	d4 <u>46900</u>	e4 <u>3125</u>
a5 _____	b5 <input type="checkbox"/>	c5 MN _____	d5 _____	e5 _____

Subtotal for additional Forms W-2 (from line 5 on page 2) \_\_\_\_\_

**Total Minnesota tax withheld on all Forms W-2 (add amounts in line 1, column E) ..... 1 ■ 12473**

**2** Minnesota tax withheld on Forms 1099, W-2G, and 1042-S. If you have more than four forms, complete line 6 on the back.

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
If the Form 1099, W-2G, or 1042-S is for: • you, enter 1 • spouse, enter 2	Payer's seven-digit Minnesota Tax ID Number (if unknown, contact the payer)	Income amount (see the table on the back for amounts to include)	Minnesota tax withheld (round to nearest whole dollar)
a1 _____	b1 MN _____	c1 _____	d1 _____
a2 _____	b2 MN _____	c2 _____	d2 _____
a3 _____	b3 MN _____	c3 _____	d3 _____
a4 _____	b4 MN _____	c4 _____	d4 _____

Subtotal for additional 1099, W-2G, and 1042-S (from line 6 on page 2) \_\_\_\_\_

**Total Minnesota tax withheld on all 1099, W-2G, and 1042-S (add amounts in line 2, column D) ..... 2 ■ \_\_\_\_\_**

**3** Total Minnesota tax withheld by partnerships, S corporations, and fiduciaries

(from line 7 on page 2) ..... **3 ■ \_\_\_\_\_**

**4** Total. Add the Minnesota tax withheld on lines 1, 2, and 3.

Enter the total here and on line 20 of Form M1 ..... **4 ■ 12473**Include this schedule with your Form M1.  
If required, include Schedules KPI, KS, and KF.

**2021 Schedule M15, Underpayment of Estimated Income Tax**  
For Individuals (Form M1)

DANIEL ' LA

Your First Name and Initial

DEERING

Last Name

Social Security Number

**Required Annual Payment**

- 1 Minnesota income tax for **2021** (from line 17 of Form M1) ..... 1 26059
- 2 Minnesota withholding and credits for **2021** (add lines 20 and 22 of Form M1) ..... 2 12473
- 3 Subtract line 2 from line 1. If less than \$500, **STOP HERE**; you do not owe an underpayment penalty. .... 3 13586
- 4 Multiply line 1 by 90% (.90). **Farmers and commercial fishermen:** Multiply line 1 by 66.7% (.667). .... 4 23453
- 5 Minnesota income tax for 2020 (from line 17 of Form M1). See instructions if your 2020 federal adjusted gross income was more than \$150,000 or if you did not file a 2020 return. .... 5 18951
- 6 Required annual payment. Amount from line 4 or line 5, whichever is less. .... 6 18951
- If line 6 is less than or equal to line 2, **STOP HERE**; you do not owe an underpayment penalty.
  - If line 6 is more than line 2, continue with line 7 or line 13, depending on which method you use.

**Optional Short Method** (see instructions to determine which method to use)

- 7 Quarterly estimated tax payments you made for 2021. .... 7 12473
- 8 Add line 2 and line 7. .... 8 6478
- 9 Total underpayment for the year. Subtract line 8 from line 6  
(if result is zero or less, **STOP HERE**; you do not owe an underpayment penalty) ..... 9 130
- 10 Multiply line 9 by 2% (.02) ..... 10 26
- 11 • If the amount on line 9 will be paid on or after April 15, 2022, enter 0.  
• If the amount was paid before April 15, 2022, use the following computation  
and enter the result on line 11:
- |                  |   |                                       |                |
|------------------|---|---------------------------------------|----------------|
| Amount on line 9 |   | Number of days<br>paid before 4/15/22 |                |
| <u>6478</u>      | x | <u>11</u>                             | x.000137       |
|                  |   |                                       | 11 <u>7126</u> |
- 12 **Penalty.** Subtract line 11 from line 10. Enter result here and on line 27 of Form M1. .... 12 130

**Regular Method**

- |   | A<br>April 15, 2021 | B<br>June 15, 2021 | C<br>Sept. 15, 2021 | D<br>Jan. 18, 2022 |
|---|---------------------|--------------------|---------------------|--------------------|
| 13 Enter 25% (.25) of line 6 in each column OR use the annualized income installment worksheet on the back of this form. If you use the worksheet or are a farmer or fisherman, see instructions. .... 13   |                     |                    |                     |                    |
| 14 <b>Credits.</b> See instructions. .... 14  |                     |                    |                     |                    |
| 15 <b>Overpayment.</b> If line 14 is more than line 13, subtract line 13 from line 14. Enter the result here and add it to line 14 in the next column. Overpayments in any quarter following an underpayment must first be applied to making up previous underpayments. .... 15 |                     |                    |                     |                    |
| 16 <b>Underpayment.</b> If line 14 is less than line 13, subtract line 14 from line 13. Enter the result here and go to line 17 below. .... 16  |                     |                    |                     |                    |
| 17 Enter the date of payment or April 15, 2022, whichever is earlier (see instructions). .... 17  |                     |                    |                     |                    |
| 18 Number of days between the payment due date and the date on line 17. .... 18   |                     |                    |                     |                    |
| 19 Divide line 18 by 365. The result is a decimal. .... 19  |                     |                    |                     |                    |
| 20 Multiply line 19 by 3% (.03). Enter as a decimal. .... 20  |                     |                    |                     |                    |
| 21 Multiply line 20 by line 16. .... 21   |                     |                    |                     |                    |
| 22 <b>Penalty.</b> Add columns A-D on line 21. Enter result here and on line 27 of Form M1. .... 22   |                     |                    |                     |                    |

**You must include this schedule with your Form M1.**



DO NOT FILE



\*2 11 1 6 1\*

## 2021 Schedule M1SA, Minnesota Itemized Deductions

DANIEL 'LA  
Your First Name and InitialDEERING  
Last Name[REDACTED]  
Your Social Security Number

## Medical and Dental Expenses

- 1 Medical and dental expenses (see instructions) ..... 1 ■ \_\_\_\_\_
- 2 Adjusted gross income (see instructions) ..... 2 \_\_\_\_\_ 342839
- 3 Multiply line 2 by 10% (.10) ..... 3 \_\_\_\_\_ 34284
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter 0 ..... 4 ■ \_\_\_\_\_ 0

## Taxes You Paid

- 5 Real estate taxes (see instructions) ..... 5 ■ \_\_\_\_\_ 15691
- 6 Personal property taxes (see instructions) ..... 6 ■ \_\_\_\_\_
- 7 Add lines 5 and 6 ..... 7 ■ \_\_\_\_\_ 15691
- 8 Enter the lesser of line 7 or \$10,000 (\$5,000 if Married Filing Separately). 8 ■ \_\_\_\_\_ 10000
- 9 Other taxes. List the type and amount ..... 9 ■ \_\_\_\_\_
- 10 Add lines 8 and 9 ..... 10 ■ \_\_\_\_\_ 10000

## Interest You Paid

- 11 Home mortgage interest and points on federal Form 1098 ..... 11 \_\_\_\_\_ 23114
- 12 Home mortgage interest and points not reported to you on Form 1098  
(see instructions) ..... 12 \_\_\_\_\_
- 13 Investment interest expense ..... 13 \_\_\_\_\_
- 14 Add lines 11 through 13 ..... 14 ■ \_\_\_\_\_ 23114

## Charitable Contributions

- 15 Charitable contributions by cash or check (see instructions) ..... 15 \_\_\_\_\_ 700
- 16 Charitable contributions by other than cash or check (see instructions) .. 16 \_\_\_\_\_ 1500
- 17 Carryover of charitable contributions from a prior year ..... 17 \_\_\_\_\_
- 18 Add lines 15 through 17 ..... 18 ■ \_\_\_\_\_ 2200

## Casualty and Theft Losses

- 19 Casualty or theft loss (enclose Schedule M1CAT) ..... 19 ■ \_\_\_\_\_

## Unreimbursed Employee Business Expenses

- 20 Unreimbursed employee expenses (enclose Schedule M1UE) ..... 20 ■ \_\_\_\_\_
- 21 Adjusted gross income (see instructions) ..... 21 \_\_\_\_\_ 342839
- 22 Multiply line 21 by 2% (.02) ..... 22 \_\_\_\_\_ 6857
- 23 Subtract line 22 from line 20. If zero or less, enter 0 ..... 23 ■ \_\_\_\_\_ 0

## Other Miscellaneous Deductions

- 24 Other miscellaneous deductions (see instructions) ..... 24 ■ \_\_\_\_\_  
List type and amount \_\_\_\_\_
- 25 Add lines 4, 10, 14, 18, 19, 23, and 24 ..... 25 ■ \_\_\_\_\_ 35314
- 26 Complete the worksheet in the instructions if Line 1 of Form M1 or line 37 of Schedule M1NC  
is more than \$199,850 (\$99,925 if your filing status is Married Filing Separately) ..... 26 ■ \_\_\_\_\_ 4290
- 27 Subtract line 26 from line 25. Enter the result here and on line 4 of Form M1 ..... 27 ■ \_\_\_\_\_ 31024

`0010100000000000000000001231213000480961057500000000000000000000000001112`